

## ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

## SECTION A - PROPERTY OWNER INFORMATION

BUILDING OWNER'S NAME

Knapp Classic Homes

BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.  
328 Brookhaven Drive

CITY

Central Point

STATE  
OR

ZIP CODE

97502

PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)  
372W03BD TL 305 Lot # 17 Cedar Park, Phase 1BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.)  
Residential

LATITUDE/LONGITUDE (OPTIONAL)

(##°-##'-###" or ###.####")

HORIZONTAL DATUM:

☐ NAD 1927 ☐ NAD 1983SOURCE: ☐ GPS (Type):☐ USGS Quad Map☐ Other:

## SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME &amp; COMMUNITY NUMBER

Central Point 410092

B2. COUNTY NAME

Jackson

B3. STATE

Oregon

B4. MAP AND PANEL

NUMBER

410092 0001

B5. SUFFIX

C

B6. FIRM INDEX DATE

01/1982

B7. FIRM PANEL

EFFECTIVE/REVISED DATE

01/1982

B8. FLOOD ZONE(S)

AE

B9. BASE FLOOD ELEVATION(S)

(Zone AD, use depth of flooding)  
1241.2

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.

☐ FIS Profile☐ FIRM☐ Community Determined☒ Other (Describe): See CommentsB11. Indicate the elevation datum used for the BFE in B9: ☒ NGVD 1929☐ NAVD 1988☐ Other (Describe):B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? ☐ Yes ☐ No Designation Date

## SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: ☐ Construction Drawings\* ☐ Building Under Construction\* ☒ Finished Construction

\*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 8 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO

Complete Items C3.-a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum NGVD29 Conversion/Comments

Elevation reference mark used RM2 Does the elevation reference mark used appear on the FIRM? ☒ Yes ☐ No

a) Top of bottom floor (including basement or enclosure)

1239.8 ft.(m)

b) Top of next higher floor

1242.7 ft.(m)

c) Bottom of lowest horizontal structural member (V zones only)

N/A. ft.(m)

d) Attached garage (top of slab)

1241.7 ft.(m)

e) Lowest elevation of machinery and/or equipment

servicing the building (Describe in a Comments area)

1241.7 ft.(m)

f) Lowest adjacent (finished) grade (LAG)

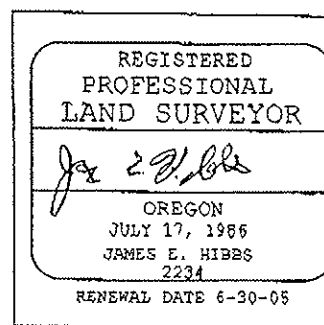
1240.7 ft.(m)

g) Highest adjacent (finished) grade (HAG)

1241.0 ft.(m)

h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 15

i) Total area of all permanent openings (flood vents) in C3.h 1680 sq. in. (sq. cm)

License Number, Embossed Seal,  
Signature, and Date

## SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.

I certify that the information in Sections A, B, and C on this certificate represents my best efforts to interpret the data available.

I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

CERTIFIER'S NAME James E. Hibbs

LICENSE NUMBER 2234

TITLE Professional Land Surveyor

COMPANY NAME L. J. Friar &amp; Associates, P.C.

ADDRESS

816 W. 8th Street

CITY

Medford

STATE

OR

ZIP CODE

97501

SIGNATURE

DATE

09/22/04

TELEPHONE

541-772-2782

**IMPORTANT: In these spaces, copy the corresponding information from Section A.**

BUILDING STREET ADDRESS (including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO.

328 Brookhaven Drive

CITY  
Central Point

STATE  
OR

ZIP CODE  
97502

For Insurance Company Use:

Policy Number

Company NAIC Number

**SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)**

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

Section 3, Item 3B - BFE is based on HEC RAS flood study by Hammond Engineering dated 04/22/04

Item C3b is top of finish floor.

☐ Check here if attachments

**SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)**

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

E1. Building Diagram Number (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

E2. The top of the bottom floor (including basement or enclosure) of the building is \_\_\_ ft.(m) \_\_\_ in.(cm) ☐ above or ☐ below (check one) the highest adjacent grade. (Use natural grade, if available).

E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is \_\_\_ ft.(m) \_\_\_ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.

E4. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?

☐ Yes ☐ No ☐ Unknown. The local official must certify this information in Section G.

**SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION**

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. The statements in Sections A, B, C, and E are correct to the best of my knowledge.

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS

CITY

STATE

ZIP CODE

SIGNATURE

DATE

TELEPHONE

COMMENTS

☐ Check here if attachments

**SECTION G - COMMUNITY INFORMATION (OPTIONAL)**

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

G1. ☒ The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)

G2. ☐ A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.

G3. ☒ The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER

301-0323

G5. DATE PERMIT ISSUED

8-31-2004

G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED

G7. This permit has been issued for: ☒ New Construction ☐ Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is:

G9. BFE (In Zone AO) depth of flooding at the building site is:

1234.5 ft.(m)

1241.2 ft.(m)

Date: NGVD29

Date: NGVD29

LOCAL OFFICIAL'S NAME

DAVID M. ALVORD

TITLE

COMMUNITY PLANNER

COMMUNITY NAME

CENTRAL POINT

TELEPHONE

541-664-3321 EXT. 291

SIGNATURE

[Signature]

DATE

12-10-2004

COMMENTS

BFE: DRAFT MAPS

PREPARED BY

HAMMOND ENGINEERING

☐ Check here if attachments